

ALLOWANCE HOT LIST

Appl. No.

Examiner-TC

Prepared by

Date _____

JACKET:

~~170~~

10

Primary Treatment only - complete.

ALL

14

Learning Classification Composite

PTO-892/1449:

YES

NO

Examiner's initials or cross-through lines supplied for each item cited by applicant.

YES

NO

Date(s) supplied/complete on all PTO-1449/892 sheets. (Month and year required.)

SPEC:

~~YES~~

NC

Brief Description of Drawings includes description of each figure in drawings.

YES

NC

Continuing data is mentioned in 1st paragraph. (Can be an insert.)

CLAIMS:

~~YES~~

NO

Claims listed on Notice of Allowability match allowed claims and/or index of claims.

YES

NO

Claims correctly numbered in index.

(No duplicate or missing claim numbers.)

(No incorrect dependencies.)

CRFE:

YES)

NO

If necessary (biological sequence listing).

NOTICE OF ALLOWABILITY:

YES

NO

Either Box No. 3 (drawings accepted) or Box No. 8 (corrected drawing request) has been checked.

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